

## **Massachusetts Department of Public Health**

Drug Analysis Laboratory

Boston, MA.

## **Daily Marijuana Control Check Sheet**

Test Period (mm/yy - mm/yy): \_\_\_\_\_

For Negative & Positive Control Check: Record the actual color observed or no rxn

QC Reviewer: \_\_\_\_\_  
Date:

QA Reviewer: \_\_\_\_\_  
Date: